FORM D

UNITED STATES

UNITED STATES

RECEIVED SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1140143

OMB APP	ROVAL
OMB Number:	3235-0076
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hours per response	16.00

	SEC U	JSE ONLY
Prefix		Serial
	DATE	RECEIVED

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)	
Series B Preferred Stock Offering	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [] New Filing [] Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	03017171
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Roving Planet, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 4750 Walnut St., Boulder, CO 80303	Telephone Number (Including Area Code) 303-735-5541
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	-ACESSE
Development of software for wireless communications	PROCESOES
Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed	PROCESSET MAR 2 4 2003

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

Month

IDIEI

[0|2]

Year

[0]1]

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for States

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Gronholm, Kaj	
Business or Residence Address (Number and Street, City, State, Zip Code) 4750 Walnut St, Boulder, CO 80303	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Mesch, W. Greg	
Business or Residence Address (Number and Street, City, State, Zip Code) 4750 Walnut St, Boulder, CO 80303	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Bloomer, Gary	
Business or Residence Address (Number and Street, City, State, Zip Code) 2575 Park Lane, Suite 200, Lafayette, CO 80026	
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) CVM Equity Fund V Ltd., LLP	
Business or Residence Address (Number and Street, City, State, Zip Code) 2575 Park Lane, Suite 200, Lafayette, CO 80026	
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Goldhammer, Seth	VIII.
Business or Residence Address (Number and Street, City, State, Zip Code) 1321 Balsam Avenue, #1, Boulder, CO 80304	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Pliner, Michael	
Business or Residence Address (Number and Street, City, State, Zip Code) 4750 Walnut St, Boulder, CO 80303	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INF	ORMAT	ION ABC	UT OFFI	ERING					
Has the issuer s	old, or does th	e issuer inte	nd to sell, to	non-accrec	lited investo	ors in this of	fering?	·····					Yes No
				Answer also	in Append	ix, Column	2, if filing t	under ULOI	Ē.				
2. What is the mir	nimum investr	nent that will	be accepte	d from any	individual?.			•••••		•••••••			\$1,000
													Yes No
3. Does the offering													[X] []
 Enter the information solicitation of pregistered with of such a broken 	urchasers in c the SEC and/o	onnection wor with a stat	th sales of s e or states, l	securities in ist the name	the offering of the brok	g. If a perso ter or dealer	n to be liste . If more th	d is an asso	ciated perso	n or agent o	of a broker of	or dealer	
Full Name (Last na	me first, if ind	lividual)											
<u> </u>			0	0	<u> </u>	Not	Applica	able					
Business or Reside	ice Address (I	Number and	Street, City	, State, Zip	Code)								
Name of Associate	d Broker or D	ealer						· ·					
States in Which Pe (Check "All Sta												[] All States
[AL [IL]		[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
(MT (RI)] [NE]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name (Last na				(***)	[]	[]	1	[]	įj	[]	[]	[]	
Business or Reside	nce Address (1	Number and	Street, City	, State, Zip	Code)	· · · · · · · · · · · · · · · · · · ·							····
Name of Associate	d Broker or D	ealer											
States in Which Pe (Check "All Sta	rson Listed Ha ites" or check	is Solicited c	r Intends to	Solicit Pur	chasers							[] All States
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT [RI]] [NE]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	
Full Name (Last na			[,,,]	[,,,]	[0.1]		[,,,]	[,,,,,			[""]	[110]	
Business or Reside	nce Address (1	Number and	Street, City	State, Zip	Code)								
N	,					<u>;</u>							
Name of Associate	d Broker or D	ealer											_
States in Which Pe (Check "All Sta												[] All States
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT [RI]] [NE]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt \$	-0-	\$	-O-
	Equity\$	2,500,000	- \$	2,290,483.09
	[] Common [X] Preferred		_	2,2,2,0,100.0,
	Convertible Securities (including warrants)	-0-	- \$	-0-
	Partnership Interests \$	-0-	- \$	-0-
	Other (Specify)) \$	-0-	_ \$	-0-
	Total S	2,500,000	_ \$	2,290,483.09
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	34	\$	2,290,483.09
	Non-accredited Investors	-0-	\$	-0-
	Total (for filings under Rule 504 only)		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part CQuestion 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		\$	
	Regulation A		\$	
	Rule 504	·	\$	
	Total	<u> </u>	\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	:	er.	
	Transfer Agent's Fees	[]	\$	-0-
	Printing and Engraving Costs	[]	\$	-0-
	Legal Fees	[X]	\$	\$15,000
	Accounting Fees	[]	\$ <u> </u>	-0-
	Engineering Fees	[]	\$	-0-
	Sales Commissions (Specify finders' fees separately)	[]	\$	-0-
	Other Expenses (identify)	[]	\$ _	-0-
	Total	[X]	\$	15,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE ()F PR	OCEEDS			
	b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total e furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer"	xpenses	•••••		•••••	\$ <u>_2</u>	2,485, <u>0</u> 0
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimp payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.						
				Payments to Officers, Directors & Affiliates			Payments to Others
	Salaries and fees	[]	\$	-0-	[]	\$	-0-
	Purchase of real estate	[]	\$	-0-	[]	\$	-0-
	Purchase, rental or leasing and installation of machinery and equipment	[]	\$	-0-	[]	\$	-0-
	Construction or leasing of plant buildings and facilities	[]	\$	-0-	[]	\$	-0-
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	\$	-0-	_ []	\$	-0-
	Repayment of indebtedness	[]	\$	-0-	[].	\$	-0-
	Working capital	[]	s	-0-	_ 💢	\$	2,485,00
	Other (specify):	_					•
		[]	\$_	-0-	[]	\$	0-
	Column Totals	[]	s	-0-	_ 🔀	\$	2,485,00
	Total Payments Listed (column totals added)		βQ	\$2,485.	000		
_	D. FEDERAL SIGNATURE						· · · · · · · · · · · · · · · · · · ·
und	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed up tracking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff accredited investor pursuant to paragraph (b)(2) of Rule 502.	the infe	le 505, i	the following sign furnished by the	nature o ne issuer	onsi r to a	titutes an any
	er (Print or Type) ving Planet, Inc.		Date	3/20/0	>		
Nan	ne of Signer (Print or Type) Title of Signer (Print or Type)			10010	>		
<u>w</u> .	Greg Mesch CEO			<u>.</u>	··· ··		
	•						
	A TUTUNING ON						
	ATTENTION						
i	Intentional misstatements or omissions of fact constitute federal criminal violat	ions. (See 18	U.S.C. 1001.)		